

## **FREQUENTLY ASKED QUESTIONS – DEVELOPMENTAL-BEHAVIORAL PEDIATRICS (DBP)**

*Disclaimer: This document represents the knowledge and practice of the individual that completed this FAQ*

### **1. What does a Developmental-Behavioral Pediatrician do?**

Developmental-behavioral pediatricians work with families to evaluate, treat, and coordinate care for infants, children and adolescents with developmental concerns, behavioral issues, learning difficulties, and mental health concerns, including:

- Attention deficit/hyperactivity disorder (ADHD)
- Aggression, oppositional behaviors, temper tantrums
- Autism spectrum disorder
- Developmental concerns, delays, and disabilities
- Developmental or behavioral problems related to special healthcare needs or medical conditions (e.g., genetic disorders, prematurity)
- Intellectual disability/global developmental delay
- Learning, academic, or school problems
- Anxiety, depression
- Sleep problems

### **2. Who should be referred to DBP?**

Infants, children, and adolescents where reasons for referral include:

- Suspected diagnosis (of a developmental, learning, or mental health condition)
- Guidance for resources, support, and intervention services
- Concern for co-existing conditions
- Medication management
- Medical workup
- Second opinion

### **3. Who can refer a child to DBP?**

Children are typically referred by their primary care physician or other professional provider (e.g., medical subspecialist, mental health professional, developmental services provider, educational professional). Insurances may require that a formal referral/consultation request or order placed by the child's primary care provider.

### **4. What happens during DBP appointments?**

An initial evaluation may occur over one or more visits. School reports, reports from prior evaluations medical records, and parent and teacher completed questionnaires are reviewed. The evaluation includes a discussion of parental concerns and a review of pertinent developmental, medical, and social history. A complete physical and neurological examination is conducted. As indicated by the presenting concern, formal standardized measures are administered and may include those for development and learning (e.g., Capute Scales, Kaufman Brief Intelligence Test, Wide Range Achievement Test, Social Communication Scale, Social Responsiveness Scale, Autism Diagnostic Observation Schedule, Vineland Adaptive Behavior Scales) and/or behavior and mental health (e.g., Vanderbilt, Screen for Child Anxiety Related Disorders, Childhood Depression Inventory). The assessment results are discussed, and a management plan is developed with the family. Evaluation appointments are generally 1-2 hours. Follow up appointments are generally 30-60 minutes.

#### **Services include:**

- Advocating for needed school support
- Communicating with the child's current providers
- Conducting a medical work-up for the child's condition
- Developing or adjusting a medication treatment plan

- Diagnosing medical issues
- Following up to see how the child is responding to treatment
- Identifying needed support and services
- Providing behavioral guidance
- Referring the child to community resources, such as early intervention and other programs
- Reviewing Individualized Education Programs (IEP)

**5. How are DBP visits funded?**

DBP visits are billed under medical insurance (not mental/behavioral health). Authorization criteria for visits depend on the family's specific insurer. Some families choose to self-pay for visits.

**6. What can parents do to help their children while they wait for their DBP appointment?**

Parents can encourage and foster their child's strengths and interests as well as make time for meaningful connections with their child such as through play or other shared activities (e.g., reading together, crafts, sports, talking). Parents can work with their child's pediatrician and current providers and educators on their concerns and ask for help in connecting with relevant programs and services such as those through the Regional Center, Healthy Development Services, school district, and behavioral/mental health.

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